Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10-807-021

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			19					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		·	BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	(°) mir	nus 20=	*	0		X\$ 9=		OR	X\$18=	
INE	EPENDENT C	LAIMS	3 m	inus 3 = `	*	U	٠	X43=		1 1	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT							OR		
• "	the difference	in column 1 is	less than 76	ero enter	"0" in (	column 2		+145=		OR.	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	385	OR	TOTAL		
	. C	(Column 1)	MENDED - PART II (Column 2) (Column 3)					SMALL	ENTITY	OR	OTHER SMALL	
	CLAIMS		HIGH		EST				ADDI-			ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT	İ	PREVICE PAID	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total ·	*	Minus	**		=	l	X\$ 9=	<u> </u>	OR	X\$18=	
MEN	Independent	*	Minus	***		=		X43=		OR	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.45			+290=	
								+145=		OR	+29U=	
								TOTAL ADDIT. FEE		OR ,	ADDIT. FEE	
		ı										
IT B		CLAIMS REMAINING AFTER		HIGHI NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
MEN		AMENDMENT		PAID	FOR		<b> </b>		FEE		•	FEE
AMENDMENT	Total	*	Minus	**	•	=	▍▐	X\$ 9=		OR	X\$18=.	
AM	Independent +		Minus ***		CLAIM	]=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT: FEE	
	(Column 1) (Column 2) (Column 3)								٠,			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		2		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=			X86=	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **OTAL  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **OTAL  **O										OR ,	TOTAL ODIT. FEE	
		mber Previously Paid ther Previously Paid					r four	nd in the app	ropriate box	in colu	ımn 1.	